

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE- Other instructions on reverse side.**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator **Harlow Enterprises LLC**

3a. Address  
**26 Chalk Bluff Rd, Artesia, NM 88210**

3b. Phone No. (include area code)  
**575-746-2168**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**Sec 28, T16S R29E**

5. Lease Serial No.  
**NMN15007**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
**Bear Draw**

9. API Well No.  
**multiple list attached**

10. Field and Pool, or Exploratory Area  
**Bear Draw, Premier**

11. County or Parish, State  
**Eddy, NM**

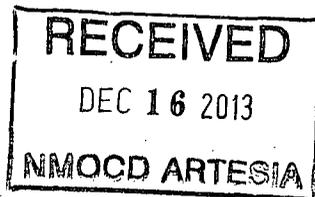
**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <b>Change of Operator</b>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

**Harlow Enterprises LLC as new operator accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portion thereof, as described below:**

List attached  
 Sec 28, T16S R29E  
 Bond Coverage Statewide: NMB000447  
 Effective Date: July 1, 2007



Accepted for record  
 Under NMOCD 12/17/13

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

**SUBJECT TO LIKE  
APPROVAL BY STATE**

14. I hereby certify that the foregoing is true and correct  
 Name (Printed/Typed)

**Jeffery L Harlow**

Title **Owner/Operator**

Signature

*Jeffery L Harlow*

Date

**1-3-13 APPROVED**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

**/s/ Jerry Blakley**

Title

**DEC 12 2013**

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

**BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

# Wells Found

Case Number	T	Operator	API Number	Well Name	Num	Stat	St	County	TWP/LAT	RGE/LON	SEC	QTR	Lease
NMNM15007	L	FROSTMAN OIL CORPORATION	300152365300S1	BEAR DRAW	1	POW	NM	EDDY	16S	29E	28	NESE	NMNM15007
NMNM15007	L	FROSTMAN OIL CORPORATION	300152401400S1	BEAR DRAW	2	POW	NM	EDDY	16S	29E	28	NWSE	NMNM15007
NMNM15007	L	FROSTMAN OIL CORPORATION	300152417000S1	BEAR DRAW	3	POW	NM	EDDY	16S	29E	28	NWNE	NMNM15007
NMNM15007	L	FROSTMAN OIL CORPORATION	300152432800S1	BEAR DRAW	4	POW	NM	EDDY	16S	29E	28	NENW	NMNM15007

BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972

Effective 7/1/2007  
Bond NMB000447

**12/12/2013 Approved subject to Conditions of Approval. JDB**  
**Change of Operator**  
**Conditions of Approval**

1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
2. Submit for approval of water disposal method.
3. Submit updated facility diagrams as per Onshore Order #3
4. This agency shall be notified of any spill or discharge as required by NTL-3A.
5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
7. Subject to like approval by NMOCD.
8. All Reporting to ONRR ( OGOR Reports) must be brought current within 30 days of this approval including any past history.